

DECLARATION
AND POWER OF ATTORNEY
(Patent, Design, or C-I-P Application)

TESSERA 3.3-001

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SEMICONDUCTOR CHIP ASSEMBLIES, METHODS OF MAKING SAME AND COMPONENTS FOR SAME

the specification of which

☐ is attached hereto

☐ was filed on _____ as Application Serial No. _____ and was amended on _____ (if applicable)

☒ was described and claimed in International Application No. PCT/US91/06920 filed 9/24/91 and as amended on _____ (if any)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)			
COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. 119
US	07/586,758	9/24/90	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
US	07/673,020	3/21/91	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
			YES <input type="checkbox"/> NO <input type="checkbox"/>
LISTING OF FOREIGN APPLICATIONS CONTINUED ON PAGE 2 HEREOF. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Lawrence I. Lerner, Reg. No. 19,516; Sidney David, Reg. No. 22,768; Joseph S. Littenberg, Reg. No. 20,832; Arnold H. Krumholz, Reg. No. 25,428; William L. Mentlik, Reg. No. 27,108; John R. Nelson, Reg. No. 26,573; Roy H. Wepner, Reg. No. 28,350; Stephen B. Goldman, Reg. No. 28,512; Paul H. Kochanski, Reg. No. 29,660; Marcus J. Millet, Reg. No. 28,241; Bruce H. Sales, Reg. No. 32,793; Daniel H. Bobis, Reg. No. 16,694; Peter J. Butch III, Reg. No. 32,203; Keith E. Gilman, Reg. No. 32,137; Robert B. Cohen, Reg. No. 32,768; Arnold B. Dompieri, Reg. No. 29,736; and Michael H. Teschner, Reg. No. 32,862

SEND CORRESPONDENCE TO: LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK 600 South Avenue West Westfield, New Jersey 07090	DIRECT TELEPHONE CALLS TO: (name and telephone number) Joseph S. Littenberg (908) 654-5000
--	---

201	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
		KHANDROS	Igor	Y.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Peekskill	New York	U.S.A.
	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
		503 Furnace Dock Road	Peekskill	New York 10566
202	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
		DISTEFANO	Thomas	H.
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
		Bronxville	New York	U.S.A.
	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE
		29 Birch Brook Road	Bronxville	New York 10708
203	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	CITY	STATE OR COUNTRY	ZIP CODE

LISTING OF INVENTORS CONTINUED ON PAGE 2 HEREOF. ☐ YES ☒ NO

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202	SIGNATURE OF INVENTOR 203
DATE	DATE	DATE

ATTACHED, SIGNED AND MADE A PART HEREOF. ☐ YES ☒ NO
ENCLOSURE to this Declaration is not used, only Page 2